

TENNESSEE DEPARTMENT OF CORRECTION
DIVISION OF ADULT INSTITUTIONS
TOMIS - OFFENDER INFORMATION SYSTEMS
SENTENCE REDUCTION CREDITS

BEGINNING DATE

ENDING DATE

COUNTY CODE

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OFFENDER NUMBER

OFFENDER LAST NAME

SENTENCE CREDITS
PROGRAM

BEHAVIOR
(Circle One)

Y	N
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Y	N
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Y	N
---	---

Y	N
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Y	N
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Y	N
---	---

Y	N
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Y	N
---	---

Y	N
---	---

Y	N
---	---

SUPERVISOR: _____

DATE: _____

SHERIFF/DESIGNEE: _____

DATE: _____

ENTERED BY: _____

DATE: _____

VERIFIED BY: _____

DATE: _____

Original and 1st copy - M.I.S. - Support Services
2nd copy - Sheriff/Designee